### Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Ch	ange in Company's premium or rate leve	el produced by rate revision effective	2/1/2012
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial	· \$864,828	0.3%
2.	Automobile Physical Damage Private Passenger Commercial	\$175,562	0.8%
3.	Liability Other Than Auto	φ170,302	0.070
4.	Burglary and Theft		
5.	Glass	-	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Do	es filing only apply to certain territory (te	erritories) or certain classes? If so, specify:	No
		tes of an advisory organization, specify organ 1-BRLA1) with company deviation of -15.0% and experie	
	ljusted to reflect all prior rate changes. hange in Company's premium level whi		Guarantee & Liability ne of Company
		Deborah Freeman, Regulatory	Services Analyst I
			fficial Title

### Form (RF-3)

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	2/1/2012
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial	\$152,327	1.9%
2.	Automobile Physical Damage Private Passenger Commercial	\$58,004	7.8%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
13.	Line of Insurance		
	Elife of Misdrando		
Do	es filing only apply to certain territory (to	erritories) or certain classes? If so, specify:	No
	• • • •	ates of an advisory organization, specify organ 1-BRLA1) with company deviation of -40.0% and experie	
*^^	ljusted to reflect all prior rate changes.		
		ich will result from application of new rates.	
		American	Zurich Insurance Co.
			ne of Company
		Deborah Freeman, Regulatory	Services Analyst I
			Yfficial Title

### FORM (RF-3)

Change in Company's premium or rate	te level produced by rate revision
effective October 1, 2011	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial	622,726	-4.5%
2	Automobile Physical Damag		
	Private Passenger		
	Commercial	199,860	-7.1%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety	•	
3.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance	<u> </u>	
•			
	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: No		
	Brief description of filing. (If fi Organization, specify organization): LI-CA-2011-184 (CA-2011-IALL1); adopt	Adopt ISO rules in LI-CA-2	011-182 (CA-2011-RCP1) and
	*Adjusted to reflect all prior ra  **Change in Company's prem		t from application of new
	rates.	Americure	Insurance Company
			ne of Company
			- Compliance Analyst II
			Official – Title
		_	

### FORM (RF-3)

Change in Company's premiu	um or rate	level produced	by rate revision
effective October 1, 2011		•	•

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial	353,226	-4.1%
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial	92,596	-5.4%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
<b>6</b> .	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	•	
13.	Commercial Multi-Peril	· · · · · · · · · · · · · · · · · · ·	•
14.	Crop Hail		
15.	Other		***
	Life of Insurance		
4	Elic of modratice		
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: No No		
	Brief description of filing. (If find organization, specify organization):	-	ivisory 011-182 (CA-2011-RCP1) and
	LI-CA-2011-184 (CA-2011-IALL1); adopt	ISO loss costs in LI-CA-2011-183	(CA-2011-BRLA1)
	*Adjusted to reflect all prior ra **Change in Company's premates.		t from application of new
		Amerisure Mu	itual Insurance Company
		Nan	ne of Company
			- Compliance Analyst II
			Official – Title

#### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective NB: 08/22/2011 RB: 09/27/2011

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	_ Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial	\$5,641,587	0.1%
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial	\$2,102, 557	0.0%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other	·	
	Life of Insurance		
•	Does filing only apply to certa Classes? If so.	in territory (territories) or	certain
	specify: No.		
	Duinf depositation of Elina (16.6	iliaa fallassa astaa astaa a	d
	Brief description of filing. (If f Organization, specify	iling follows rates of an a	uvisory
	organization):	We are changing have rates of	class relativities, territory relativities, cost new
	relativities, driver age factors, vehicle age re		
	CMPD. We have implemented a \$750 Comprehe	· · · · · · · · · · · · · · · · · · ·	<del></del>
	*Adjusted to reflect all prior ra	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	minoral section of month fatting models.
	**Change in Company's prem		It from application of new
	rates.	Auto Owners Incur	ranco Company
		Auto-Owners Insur	ne of Company
			nistrator, Commercial Auto Actuarial
		riony oldano, marin	

Official - Title

### FORM (RF-3)

Change in Company's pren	nium or rate level	produced by rate revision
effective 10/01/11		

Coverage Automobile Liability Private	<ul> <li>Volume (Illinois) *</li> </ul>	GUALIUE COUST
_		Change (+or-) **
Passenger		
Commercial	55,481	-1.80%
Automobile Physical Damag		
Private Passenger		
Commercial	34,492	-1.10%
Liability Other Than Auto		
Burglary and Theft		
Glass		***************************************
Fidelity		
Surety		***
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
Does filing only apply to certa	ain territory (territories) or	certain
Classes? If so,		
specify: No		
Brief description of filing. (If	filing follows rates of an a	dvisory
Organization, specify		
organization):		Loss Costs and Rules for our
commercial auto program and maintain	ing our current LCM of 1.30 which	results in an overall decrease of
-2.9% for Bancinsure, Inc.		
*Adjusted to reflect all prior ra		ult from application of nev
**Change in Company's pren	nium level which will resu	iit iioiii appiioalioii oi iioi
		iii nom application of nov
**Change in Company's pren	Bancinsure, inc.	
**Change in Company's pren	Bancinsure, inc.	me of Company

### FORM (RF-3)

Change in Company's premium or ra	ite level produced by rate revision
effective 8-15-11(new);9-15-11(renewal)	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	<ul> <li>Volume (Illinois) *</li> </ul>	Change (+or-) **
1.	Automobile Liability Private Passenger	-	
	Commercial	\$6.8 million	+20.7%
2	Automobile Physical Damag		Proposition and the second sec
	Private Passenger	•	•
	Commercial		
3.	Liability Other Than Auto	*****	The first state of the state of
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	101111111111111111111111111111111111111	
9.	Fire		
10.	Extended Coverage		400
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		VIDEO CONTRACTOR CONTR
15.	Other		
	Life of Insurance		
•	Elic of modrance		
·	Does filing only apply to cer Classes? If so,	tain territory (territories) or	certain
	specify: Applie	s to unlimited radius trucks BIPD ra	ates.
	Brief description of filing. (If Organization, specify	filing follows rates of an ac	dvisory
	organization):	Increases BIPD baserates	for unlimited radius trucks and adjusts
	unlimited radius territory factors for Ch		
		,	and the second s
	*Adjusted to reflect all prior **Change in Company's pre rates.		t from application of new
		Canal insurance Co	ompany
		*-*	ne of Company
		Michelle Rockafellov	• •
		Mi Chille M	Official -/ Title

### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium of	or rate level produced by	rate revision
effective 02/01/2012		

Со	(1) verage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
	Liability Private		
Commercia	1	2,027,917	-7.9
Private Pas	•		
Commercia		311,011	-11.5
•	er Than Auto		
Burglary and	d Theft		
Glass			
Fidelity			
Surety	Analain an		
Boiler and N Fire	lachinery		
Extended C	ovorago		
Inland Marir			
Homeowner			
Commercial			
Crop Hail	· ·		
Other			
	of Insurance		
Does filing Classes?		tain territory (territories) or	certain
specify:	<u>No</u>		
D. C. L.	- C - C - C - C - C - C - C - C - C - C	CC C C C C C C C C C C C C C C C C C C	
Organizatio		filing follows rates of an a	iavisory <sub>.</sub>
organization		ISO - Designation Nun	nber: CA-2011-BRLA1
		· · · · · · · · · · · · · · · · · · ·	
	reflect all prior		ili fram annlination of o
•	n Company's pre	mium level which will resu	iit from application of n
rates.			•

Carolina Casualty Insurance Company
Name of Company
Anna M. Thomas - Compliance Analyst
Official - Title

### FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or ra	te level produced by rate revision
effective_01/01/2012	

(1)	(2)	(3)
Co.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Annual Premium	Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Priva		
Passenger	None	n/a
Commercial	<b>\$149,571</b>	-8.8%
Automobile Physical Dar	-	
Private Passenger	n/a	n/a
Commercial	30,824	-8.8%
Liability Other Than Auto		n/a
Burglary and Theft	<u>n/a</u>	n/a
Glass	<u>n/a</u>	n/a
Fidelity	n/a	n/a
Surety	n/a	n/a
Boiler and Machinery	n/a	n/a
Fire	n/a	n/a
Extended Coverage	n/a	n/a
Inland Marine	n/a	n/a
Homeowners	n/a	n/a
Commercial Multi-Peril	n/a	n/a
Crop Hail	n/a	n/a
Other	n/a	n/a
Life of Insurance		
Does filing only apply to Classes? If so,	certain territory (territories) o	r certain
•		
specify: no		
Brief description of filing	(If filing follows rates of an a	advison
Organization, specify	(Willing Follows Fatos of art	ad vider y
organization):	ISO Loss Cost - CA -	2011-BRI A1
,		
*Adjusted to reflect all pr	ior rate changes.	
	premium level which will resu	ult from application of ne

Name of Company

Office A 1/1

Official - Title

### FORM (RF-3)

Change in Company's premi	um or rate level	produced by rate	revision
effective 01/01/2012		,	

	Coverage Automobile Liability Private Passenger Commercial Automobile Physical Damag Private Passenger Commercial Liability Other Than Auto	Annual Premium Volume (Illinois) *  None \$149,571  n/a n/a	Percent Change (+or-) **  n/a +2.9%
	Automobile Liability Private Passenger Commercial Automobile Physical Damag Private Passenger Commercial Liability Other Than Auto	None \$149,571 n/a	n/a +2.9%
	Passenger Commercial Automobile Physical Damag Private Passenger Commercial Liability Other Than Auto	\$149,571 n/a	+2.9%
	Commercial Automobile Physical Damag Private Passenger Commercial Liability Other Than Auto	\$149,571 n/a	+2.9%
	Automobile Physical Damag Private Passenger Commercial Liability Other Than Auto	n/a	
· ·	Private Passenger Commercial Liability Other Than Auto		
	Commercial Liability Other Than Auto		
	Liability Other Than Auto	n/a	_n/a
•	<del>_</del>	1 / W	n/a
		n/a	n/a
	Burglary and Theft	n/a	n/a
	Glass	n/a	n/a
	Fidelity	n/a	n/a
	Surety	n/a	n/a
	Boiler and Machinery	n/a	r√a
	Fire	n/a	n/a
٥.	Extended Coverage	n/a	n/a
	Inland Marine	n/a	n/a
2.	Homeowners	n/a	n/a
3.	Commercial Multi-Peril	n/a	n/a
4.	Crop Hail	n/a	r/a
5.	Other	n/a	n/a
	Life of Insurance		-104
•	Does filing only apply to certa Classes? If so, specify: no	in territory (territories) or	certain
	Brief description of filing. (If f Organization, specify organization):	iling follows rates of an a	-
	*Adjusted to reflect all prior ra **Change in Company's prem		It from application of new
	rates.		
			INSURANCE COMAPNY
		Michael C.	me of Company Amazi Official – Title

### Form (RF-3)

### **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate le	vel produced by rate revision effective	10/01/2011
(1) <u>Coverage</u> 1.Automobile Liability Commercial	(2) Annual Premium Volume (Illinois)* \$1,228,856	(3) Percent <u>Change (+ or -)**</u> -5.2%
<ol> <li>Automobile Physical Damage Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> </ol>	\$252,366	-11.5%
<ol> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> <li>Crop Hail</li> </ol>		
NO  Brief description of filing. (If filing follows Cost CA-2011-BRLA1, ISO Increase Lir	territories) or certain classes? If so, specify so rates of an advisory organization, specify nits change CA-2011-IALL1 and IO Form ncreased limits changes.	organization): Adoption of ISO Loss changes CA-2011-RCP1. The overall
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new rates	s.  A Casualty Insurance Company
	Sw	Name of Company  Bouttelu  Dettcher, Regulatory Analyst  Official – Title

#### FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 02/01/2012 .

	(1)	(2) Annual Premium	(3) Percent
_	Coverage	Volume (Illinois) *	_ Change (+or-) **
	Automobile Liability Private		
	Passenger		
	Commercial	4162	-5.0
	Automobile Physical Damag		
	Private Passenger		
	Commercial	1032	-13.3
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage	**************************************	
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Life of Insurance		
	Does filing only apply to certa Classes? If so, specify: No	in territory (territories) or	certain
	Diff.	T	
	Brief description of filing. (If f	lling follows rates of an a	avisory
	Organization, specify	Figure to for the endough	Almaniana Camilana Office I (1)
	organization):	Filing is for the adoption of	of Insurance Services Office, Inc. (IS
	Loss Cost ( CA-2011-BRLA1).		

Official – Title

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

	Change in Company's premium or ra	te level produced by rate revision	effective: 10/1/2011
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial	\$238,717	-4.72%
2.	Automobile Physical Damage Private Passenger Commercial	\$94,432	-15.49%
3.	Liability Other Than Auto		
4.	Burglary & Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		•
8.	Boiler & Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation		
16.	Other:		
Does fi If so, s	Line of Insurance ling only apply to certain territory (terpecify:	ritories) or certain classes? <u>No</u>	

filing reference number CA-2011-BRLA1 for new and renewal business effective 10-1-11.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

IMT Insurance Company
Name of Company

Adopting ISO

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

### FORM (RF-3)

Change in Company's premium	or rate level produced by rate revision
effective 12/01/2011	

-	(1)	(2) Annual Premium	(3) Percent
4	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial	139611	6%
2	Automobile Physical Damag Private Passenger		•
	Commercial	54949	5%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass	***************************************	- MANAGEMENT - AND
6.	Fidelity		
7.	Surety	<del></del>	
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage	<del></del>	
11.	Inland Marine	-	
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
10.	Life of Insurance		
•	Life of frisurance		
•	Does filing only apply to certa Classes? If so, specify:	in territory (territories) or	certain
	Brief description of filing. (If find Organization, specify organization):	-	dvisory ss costs contained in ISO
	Reference Document Number CA-2		
	TOTAL		
	*Adjusted to reflect all prior ra **Change in Company's prem rates.		t from application of new
		Indiana Lumberme	ns Mutual Insurance Company
		Nar	ne of Company
		Pamela Holliday, R	egulatory Compliance Analyst
			Official – Title

### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 09/01/2011

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger	NO. 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 - 200 -	
	Commercial	1,113,215	0
2	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		**************************************
14.	Crop Hail	* · · · · · · · · · · · · · · · · · · ·	
15.	Other		
	Life of Insurance	<del></del>	
•			
	Does filing only apply to certain Classes? If so,	in territory (territories) or	certain
	specify: No		
	opesity.		
	Brief description of filing. (If fi Organization, specify	ling follows rates of an a	dvisory
	organization):	Adoption of ISO Revise	ed Loss Costs Rule 97.
	Uninsured Motorists Insurance		
	*Adjusted to reflect all prior ra **Change in Company's premates.		t from application of new
	10.03.	National American	Insurance Company
			ne of Company
		Jennifer Carr, Rate	
			Official – Title

### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 10/01/2011

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial	1,113,215	-5.2%
2	Automobile Physical Damag		
	Private Passenger		
	Commercial	10,320	-11.5%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	,	· · · · · · · · · · · · · · · · · · ·
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
	Ene of madranee		
·	Does filing only apply to certa Classes? If so,	in territory (territories) or o	certain
	specify: No		
	Brief description of filing. (If fi	ling follows rates of an ad	visorv
	Organization, specify		•
	organization):	Adoption of ISO Revised	d Loss Costs, Increased
	Limits Factors, and Rules		
	*Adjusted to reflect all prior ra **Change in Company's prem rates.		from application of new
	. 4.55.	National American la	nsurance Company
			ne of Company
		Jennifer Carr, Rate	•
			fficial – Title

### FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 07/15/2011 \_\_\_\_\_.

-	(1)	(2) Annual Premium	(3) Percent
4	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger	40.005.000	0.50/
2	Commercial	\$9,025,662	0.5%
2	Automobile Physical Damag		•
	Private Passenger	<b>A400.057</b>	0.50/
^	Commercial	\$133,657	0.5%
3.	Liability Other Than Auto		
4. -	Burglary and Theft		
5.	Glass		
6. <b>7</b>	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9. 10	Fire	·	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	<del></del>	
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
٠	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so.	with torritory (torritorios) of	
	specify: N/A		
	Brief description of filing. (If f Organization, specify organization): Commercial Automobile rates, rule		dvisory
	Commercial Automobile rates, rule	3, and Low revision ming	
	*Adjusted to reflect all prior ra **Change in Company's premates.	nium level which will resul	• •
			Insurance Company
		Nar	ne of Company

David M. Cleff - Sr. V. P. and General Counsel
Official - Title

#### **SUMMARY SHEET**

	Change in Company's pre revision effective	emium or rate level produced by rate 9/1/2011	
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change ( + or -)**
1.	Automobile Liability		
	Private Passenger	\$698,129	0.0%
	Commercial	\$71,434	0.0%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	· · · · · · · · · · · · · · · · · · ·	
10.	Extended Coverage		,
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
D			
	s Filing only apply to certain territo ses? If so, specify:	ry (territories) or certain	
—— Brie	f description of filing. (If filing follow	ws rates of an advisory	
	inization, specify organization):	Adoption of ISO's Commercial Auto	Loss Costs Rule 97.
	, , , , , , , , , , , , , , , , , , , ,	Revision	
			•
	* Adjusted to reflect all prior rate c	hanges.	

**Nova Casualty Company** Name of Company

Diane Legere - Vice President
Official - Title

<sup>\*\*</sup> Change in Company's premium level which will result from application of new rates.

### **SUMMARY SHEET**

	Change in Company's pre- revision effective	mium or rate level produced by rate 10/1/2011 .	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change ( + or -)**</u>
1.	Automobile Liability Private Passenger Commercial	\$698,129	-7.9%
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15.	Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance	\$71,434	-11.5%
	s Filing only apply to certain territonises? If so, specify:	ry (territories) or certain	
	f description of filing. (If filing follo nization, specify organization):	ws rates of an advisory  Adoption of ISO's Commercial Au  Loss Costs Revision	to Advisory Prospective
*	* Adjusted to reflect all prior rate cl * Change in Company's premium le result from application of new rat	evel which will	

Nova Casualty Company
Name of Company

Diane Legere - Vice President
Official - Title

### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium or i	rate level produced by rate revision
effective NB: 08/22/2011 RB: 09/27/2011	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
_	Commercial	\$5,719,976	2.5%
2	Automobile Physical Damag		•
	Private Passenger		
_	Commercial	\$2,573,688	2.1%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	•	
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa Classes? If so, specify: No.	ain territory (territories) or	certain
	specify.		
	Brief description of filing. (If f	iling follows rates of an a	dvisory
	organization):	We are changing base rate	es, class relativities, territory relativities,
	driver age factors, vehicle age relativities	, fleet factors, paid in full discount, f	arm use discount and CMPD. We have
	implemented a \$750 Comprehensive & Co	llision deductible and new Commerci	al Business Score & Merit Rating models.
	*Adjusted to reflect all prior ra **Change in Company's prem		It from application of new
	rates.		• •
		Owners Insurance	Company

Name of Company
Kelly Staake, Administrator, Commercial Auto Actuarial
Official — Title

Change in Company's	premium	or	rate	level	produced	by	rate
revision effective	7/15/2011					. •	

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial	912,983	5.0
<ol><li>Automobile Physical Damage Private Passenger</li></ol>		
Commercial	388,303	1.5
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety	<del></del>	
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain If so, specify: All territories and classes  Brief description of filing. (If organization, specify organization	filing follows rates of a	n advisory
* Adjusted to reflect all prior ** Change in Company's premium le result from application of new	vel which will rates. Sentry Insurance a Mutu	
mix	Name of Compar William	ny
	Official - Tit	ident- Chief Actuary
	OIIICIAI TIC	

#### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective October 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private	- Volume (minois)	_ Change (+oi-)
Passenger		
Commercial	¢404.205	9.99/ (actimated)
Automobile Physical Damag	\$101,395	-8.8% (estimated)
Private Passenger		•
•	¢15 610	Q QQ/ (antimotod)
Commercial	\$15,619	-8.8%(estimated)
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire	·	
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
Does filing only apply to certa Classes? If so, specify:	ain territory (territories) or	certain
Classes? If so, specify:  Brief description of filing. (If the Organization, specify)	iling follows rates of an a	dvisory
Classes? If so, specify:  Brief description of filing. (If the second se		dvisory
Classes? If so, specify:  Brief description of filing. (If the Organization, specify)	iling follows rates of an a	dvisory
Classes? If so, specify:  Brief description of filing. (If the Organization, specify)	iling follows rates of an a  ISO adoption of reference ate changes.	dvisory CA-2011-BRLA1

Name of Company
Walter J Kozuch, Vice President - Technical Services

Official - Title

1.

2

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.

#### Section 754.EXHIBIT A Summary Sheet (Form RF-3)

#### FORM (RF-3)

#### **SUMMARY SHEET**

| (1)                             | (2) Annual Premium            | (3)<br>Percent                         |
|---------------------------------|-------------------------------|--|
| Coverage                        | Volume (Illinois) *           | Change (+or-) **                       |
| Automobile Liability Private    |                               |  |
| Passenger<br>Commercial         | 007                           | -5.0                                   |
| Automobile Physical Damag       | 827                           | -5.0                                   |
| Private Passenger               |                               |  |
| Commercial                      | 316                           | -13.3                                  |
| Liability Other Than Auto       |                               | ************************************** |
| Burglary and Theft              |                               |  |
| Glass                           |                               |  |
| Fidelity                        |                               |  |
| Surety                          |                               |  |
| Boiler and Machinery            |                               |  |
| Fire                            |                               |  |
| Extended Coverage               |                               |  |
| nland Marine                    |                               |  |
| Homeowners                      |                               |  |
| Commercial Multi-Peril          |                               |  |
| Crop Hail                       |                               |  |
| Other Life of Lawrence          |                               | <u></u>                                |
| Life of Insurance               |                               |  |
| Does filing only apply to certa | ain territory (territories) o | r certain                              |
| Classes? If so,                 |                               |  |
| specify: No No                  |                               |  |

Organization, specify

Loss Cost ( CA-2011-BRLA1).

organization):

Brief description of filing. (If filing follows rates of an advisory

**Strathmore Insurance Company** 

Name of Company
John Moylan - VP Commercial Lines Underwriting
Official - Title

Filing is for the adoption of Insurance Services Office, Inc. (ISO)

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

### Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level produced by rate revision effective |   | 2/1/2012   |  |
|---|---|--|--|
|   | (1)<br><u>Coverage</u>  | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u>   | (3)<br>Percent<br><u>Change (+ or -)**</u> |
|   | obile Liability Private<br>ssenger Commercial                       | \$286,570  | -0.8%                                      |
|   | obile Physical Damage   | \$200,570  | -0.378                                     |
|   | vate Passenger Commercial _   | \$54,675   | -1.6%                                      |
|   | y Other Than Auto   |  |  |
|   | ry and Theft  |  |  |
| 5. Glass  | _   |  |  |
| <ol> <li>Fidelity</li> <li>Surety</li> </ol>                                  | <del></del>   |  |  |
|   | and Machinery   |  |  |
| 9. Fire   |   |  |  |
|   | ded Coverage  |  |  |
| 11. Inland  | <del>-</del>  |  |  |
| 12. Home  | owners<br>ercial Multi-Peril  |  |  |
| 14. Crop I  | <del>-</del>  |  |  |
| 15. Other   |   |  |  |
| •   | Line of Insurance   |  |  |
| Does filing   | only apply to certain territory (ter                                | ritories) or certain classes? If so, specify:  | No   |
|   |   | es of an advisory organization, specify organ<br>BRLA1) with company deviation of +35.0% and experie |  |
|   | o reflect all prior rate changes.<br>n Company's premium level whic | h will result from application of new rates.   |  |
|   |   | Zurich Americ  | can Insurance Co. Of IL                    |
|   |   | Nam  | ne of Company                              |
|   |   | Deborah Freeman, Regulatory  | Services Analyst I                         |
|   | •   |  | fficial – Title                            |

### Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level produced by rate revision effective |   | el produced by rate revision effective   | 2/1/2012                                   |
|---|---|--|--|
|   | (1)<br><u>Coverage</u>  | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u>   | (3)<br>Percent<br><u>Change (+ or -)**</u> |
| 1.  | Automobile Liability Private Passenger Commercial                                   | \$3,713,185  | -0.1%                                      |
| 2.  | Automobile Physical Damage Private Passenger Commercial                             | \$944,790  | -0.5%                                      |
| 3.  | Liability Other Than Auto   |  |  |
| 4.  | Burglary and Theft  |  |  |
| 5.  | Glass   |  |  |
| 6.  | Fidelity  |  |  |
| 7.<br>8.  | Surety Boiler and Machinery   |  |  |
| 9.  | Fire  |  |  |
|   | Extended Coverage   |  |  |
|   | Inland Marine   |  |  |
| 12  | Homeowners  |  |  |
|   | Commercial Multi-Peril  |  |  |
|   | . Crop Hail   |  |  |
| 15  | Other   |  |  |
|   | Line of Insurance   |  |  |
| Do  | es filing only apply to certain territory (te                                       | erritories) or certain classes? If so, specify:  | , No                                       |
|   | oc ming only apply to contain terminity (to   | , , , , ,  |  |
|   |   | ites of an advisory organization, specify organ<br>1-BRLA1) with company deviation of +10.0% and experience. |  |
|   | djusted to reflect all prior rate changes.<br>Change in Company's premium level whi | ch will result from application of new rates.  |  |
|   |   | Zurich Am  | nerican Insurance Co.                      |
|   |   | Nan  | ne of Company                              |
|   |   | Deborah Freeman, Regulatory  | Services Analyst I                         |
|   |   |  | Official – Title                           |